"Who Cares for the Caregivers?"

Shirley, Skip, and Darlene –

Here is a very rough draft of the ideas which I have been mulling over the last couple of months – make that years and we shall all be closer to the truth. I have thought that Bob's ideas for the H+ tapes were too good to be left unused, especially when the messages that have been encoded in the "Emergency Series" have so much strength to them. Either because of the influence of being bombed out of my mind with medications from hospitalization, thus, less resistant, the "55515" remains with me today as the only fond memory I have from cancer surgery in 1995.

These are the areas that shall be addressed in creating a proposal for the topic - 'the use of binaural beat' and conceptual tools to aid in the diminishment of stress reactions which lead to burn out in situational arenas where technical response is extremely critical.

The following outline is Saybrook's rubric for research competencies, all of which shall be incorporated as the project develops.

1. Title:
2. Abstract:
3. Scope of the Literature:
4. Literature Review:
5. Question Formulation and Purpose of the Study:
6. Methodological Selection and Formulation:
7. Methods and Procedures:
8. Research Ethics:
9. Analysis and Interpretation:
10. Critical Evaluation and Conclusions:
11. Reporting:
12. Contribution:

The working title is "Improving Personal Response to Stressors through the Acquisition and Demonstrated Application of Focus Eleven States." The concepts of stress and burn out have been applied to areas of life which require highly focused responses, i.e. life or death scenarios, in hospital care. Nurses in hospitals and chronic care units, specifically, registered nurses, are found to report four times greater burn out than counterparts. CITATION By introducing a technological tool such as the binaural beat and frequency following response for their personal repertoire of self-centering methods, it is expected that the nurses who are in such highly stressful situations would be capable of drawing upon phrases [Focus Eleven was the **H+** (Human Potential Plus)] concept that Robert A. Monroe of The Monroe Institute (TMI) introduced as a tool for the development of the human potential movement CITATION. Within the various applications were modified self-hypnotic suggestions which when triggered by conscious repetition could provide a momentary "boost" to the situation in an appropriate manner, without interference to delivery of necessary "skills, abilities, response methods, capabilities" for the given scenario.)

Herein would be a review of the literature from **TMI** on the use and applications of **FFR**, **binaural beats**, and significant responses that have occurred. Additionally, a review of literature regarding **nursing**, **burn out**, the need for **technological tools** which momentarily bypass 'religious' doctrines, simple solutions which have addressed **relaxation**, the need for tools which may afford **rejuvenation** that **do not detract** from the delivery of level of care that patients have desired to experience – all at no additional psychic cost to the care givers. Monetary considerations of expenses to the personal worlds of the care givers, hospitals which must release from contract, renegotiations of contracts, insurance expenditures for the nursing staff when unable to return to work without overriding signs of fatigue, addressing the **"bottom line" financials** that all care units face when there is high turn over and drop out in areas that require intensive training and care management.

The basis of this thinking has come from the recognition of the work of John Hennen who introduced the concept of managed care in the form of Health Management Organizations (HMOs) in the late 1970's. Personally, my experiences have brought me to this point of having been provided an opportunity to add to the *next major development to soften the work that has come before.* There could not have been a means of knowing how HMOs would have developed, or the roles insurance and drug industries would assume in handling the healthcare of the nation. The human factors, e.g. the nurses, physicians, technicians, specialists have been given a tremendous set of challenges where money is not sufficient compensation (i.e. a dance card that is overfull with no one noticing that the band has quit performing). The consequences of burn out affect everyone, even those who have yet to experience any breakdown in their health.

How can this be viewed from a Humanistic Psychological perspective? Healthcare which always relied upon the physical touch of humans and their accompanying intuitive states (closed-looped systems) have been relegated along with their stores of knowledge and skills to the proverbial scrap heap. If healthcare and its human component are to survive the very sensitivities which make us human must be preserved. Humanistic Psychology and its history of recognition of the inner worlds, existentialism, the transpersonal, and CITATION offer the untapped wealth of humanity to the soul of healthcare as it is known today – a salvo jure – for it is not within the scope of Humanistic Psychology to desire to take on the accounting of costs or the burden of manufacturing of medications and the continued research and development of these items. Leaving the human potential to the humanists to address, all may emerge victorious.

The raising of consciousness is not a nebulous concept. It is easily understood in terms of the one simple thing each person can do to create some breathing space when confronted by multiple stressors, each of which in their own right could demand hours of attention, but which under current management CITATION must receive only a minimum of time allotted. This has proven to be damaging and predictably injurious to the mental health of providers who have taken oaths CITATION, long-standing oaths, which represent levels of commitment that are now under attack because of financial considerations CITATION (ref: Tanner, AP – "List tells who would get care – and who wouldn't – in a pandemic" - doctors to follow list of who to provide prophylactic care to in case of national healthcare crisis – re: long-term survival. Recent article in The Baltimore Sun, May 6, 2008).

Quantitative: The methods which currently are being considered for soliciting participants is to draw from local hospitals, student nursing candidates at the local community colleges, and referrals from management at care facilities. What is proposed is an introductory lecture, random selection from the lecture for either active participation or control group (target: n = 25 per group); surveys to be administered at the end of the lecture; intensive weekend (conceivably one day intensive) applications of Monroe Tapes – graduated Focus 3 to Focus 11; giving a "going home" tape for continued practice and reinforcement of skills (specific to the agreed upon message arrived at between Monroe Institute and administrator of the tapes – I see potential involvement of trained Monroe Institute employee or distributor who has training) with a pre-designed chart to track usage and application results; a one month follow-up with opportunities to de-brief; and one month and one week survey for both the participants and control group members with and/or without de-briefing being offered.

An alternative is a modification of presenting a survey/questionnaire on self-perception administered to all who wish to attend the introductory lecture. The purpose of providing this self-assessment is to provide a coalescing of vocabulary that they will meet. While receiving information about the Monroe Institute, stress (which they are already familiar with), its personal and professional costs (this will require much advance preparation as I would be facing the "choir"), and the expected benefits of using the encoded messages which they can readily reinforce at will – a self-referencing system approach.

Qualitative: Questions and Answers period will allow for input at the introductory lecture. Survey responses will assist in determining who amongst potential participants would be willing to be interviewed on a case study basis to provide background to individual circumstances which contribute to magnifying stressors and the ultimate impact – dropping out of the profession altogether. I could envision meetings with nursing administrators, insurance representatives, hospital administrators to receive their input as the effects and costs of how losing highly trained staff impacts overall health care in the local community. If part of a complex of hospital systems, the information could be extrapolated to state-wide and national concerns.

Why choose the Monroe Tapes, simply because they were developed in an atmosphere where the potentialities of human consciousness were considered to be unlimited. There were no constraints placed upon participants of the programs which the Institute offered. In this atmosphere of total acceptance (lay terms: unconditional love) expansion of the Human Potential Plus could unfold naturally, with a boost from technology.

The ethical considerations which are immediately apparent are to provide informed consent forms and to describe the aspects of the study which might have long-lasting effects, to refrain from proselytizing, the need to be sensitive to issues of 'surrender' to the directions of the subconscious, to secure compliance with hospital or management oversight, and to provide remedial follow-up if required or deemed appropriate wither by participant or management. While seen as an opportunity to gain some self knowledge, it should in no way be construed as yet another stressor in the personal lives of the participants – control group or active. Only information felt necessary to review potential obstacles to receiving as great as possible the benefits of the tapes and relaxation will be taken. The names and personal data will be encoded

to prevent disclosure to hospital or financial arms, with the exception of the refined data garnered from the study.

Analyses and interpretations will be standardized to accommodate both Saybrook and TMI - Saybrook, for its commitment to research and developing of humanistic approaches, and TMI for furtherance of applications of the use of the technologies which were developed by its founder, Robert Monroe. Whatever use is to be perpetuated by gathering this information can only be guessed at. In keeping with the spirit of its development, it could be foreseen that its applications could be utilized across many areas of life. Nurses are not alone in the experiences of stressors and the effects of such. ELABORATE

Furthermore, from personal experience, the incorporation of the lessons that have naturally accompanied the continued use and integration of the messages from self (as in, Overself) it is a replicable set of experiences. One would hope that the introduction of the H+ concepts to the general public, human consciousness will indeed reap the harvests of _____ (fill in the blank) - "a practical application of self-love," "self-awareness," "-appreciation," and a right first step to self-actualization that cannot be misconstrued to be anything other than a step towards developing a self-concept which immediately recognizes "others as self."

This is far from a complete picture, but gives the basic overview of what I have been thinking about the topic – caring for caregivers. It has not been sent to anyone at Saybrook as yet. It merely began as a proposal for providing monthly seminars in caring for caregivers with a different focus illness with each passing month. The concept was to be delivered at local spiritual centers along the lines of the non-denominational churches to be found in most communities or else local libraries. These are mentioned only as examples. At this point, they no one has been contacted and no one holds any interests. This is purely hypothetical.

Similar patterns have been conceived of – allusions to imagination, visualizations, retreats – but I believe the conceptual tools which are provided in TMI tapes as designed by Robert Monroe can be easily practiced and applied with great benefit and conceivably reduce the impact of stressors to be found, in this instance, in hospital settings. By inference, most nurses are committed providers of skilled and dedicated care towards their charges. When asked they reveal the desire to stay in their professions, but the circumstance with which they are faced – extra demands, lack of follow through from other practitioners, forces some to abandon their ideals in the face of mental health and general health issues which threaten their offsite survival as well as onsite.

The major areas that require development are "Methods and Procedure," "Analysis and Interpretation," and Critical Evaluation and Conclusions" – most of which cannot be done until after the proposal has been reworked repeatedly. If this is to be a graduate project or a dissertation for the Ph.D. level the IRB must be consulted and approval granted. There is much to be done, and much more than I could have thought of prior to being admitted to Saybrook this spring.

Reference would be made regarding the use of the Affirmation – "I am more than my physical body…" Thus, there is a great need on my part to understand copyright infringements and how to avoid them when utilizing the materials that obviously come from TMI.

My contribution to the material and its presentation, as part of a project or dissertation, would be in the manner of integration of technologies and the personal use and benefits that I have welcomed by knowing how to apply the information, the circumstances when appropriate, and how to maximize their effects. These last comments are a brief insight into my 38+ years (28+ of which has been having access to TMI workshops and tapes) of exploration of esoteric and psychological studies of human potentials.

Note:
References and citations will be provided in an approved APA format consistent with submission of articles for review by Saybrook's review board.

When you are ready to comment upon what I have written and the steps or stages that are necessary to comply with TMI's legal and ethical needs, please do not hesitate to call with questions.

Sincerely,

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P.S. I envision many references to laterality, right/left hemispheric synchronization, conceptual tools, and the benefits of using whole-brain thinking. Literature form the institute could augment the introductory lecture with the prime illustrations of the color photos enhancing graphically what is occurring and how this will immediately affect the participants' mind-brain connections. If indeed it is possible to enhance a person's abilities to cope in stressful situations meditation, the tools from TMI tapes when applied consistently and with thought, or Zen retreats are about all I can foresee as having the ability to perform and keep one's wits about one.

As known the tapes are only a tool, the work must still be done, but the rewards are infinite. The 'new' Human Potential (H+) Movement is just a phrase away. I can foresee others using affirmations as a means to try and replicate the simpler aspects of what is done, but these must be nested at a time when the mind is receptive. I believe the technology of TMI and the patterns of relaxation and conscious awareness that is permitted (the levels of alpha, beta, delta, theta that are intermixed with musical backdrops are enhancing of the relaxation modes that are desired for this to occur).